

State of Wisconsin

Department of Health and Family Services

Jim Doyle, Governor Helene Nelson, Secretary

Mental Health /AODA Redesign

Change to Base	FY 04		FY 05	
	GPR	All Funds	GPR	All Funds
Funding to counties		\$304,800		\$304,800
State level activities		\$419,400		\$144,400
Total		\$724,200		\$449,200

Description of Proposal

• Provides \$362,100 PRO and \$362,100 FED in FY 04 and \$224,600 PRO and \$224,600 FED in FY 05 to implement Phase II of Wisconsin's Mental Health/AODA Redesign. Funds costs for conducting functional eligibility screens in pilot counties, construction of an automated, web based functional screen and ongoing costs for the system, and data analysis.

Background

- Since January 2001, the Department has piloted Mental Health/AODA Redesign Demonstration projects in four sites (Dane, Milwaukee, Kenosha, and Forest/Vilas and Oneida counties). The goal of the pilots is to provide comprehensive mental health and substance abuse services using managed care strategies to improve consumer outcomes and control costs. To date the pilots have begun initial development of consumer outcomes and data sets and building capacity for consumer directed services.
- The next steps identified as needed for the Redesign project are:
- 1) Explorations of appropriate federal waivers, analysis of state plan services and consequent data efforts to promote a flexible array of services.
- 2) Design and implementation of uniform functional eligibility screens and performance based contracting in the four demonstration sites.
- 3) Improved case management and primary health care of people with mental illness, substance abuse and other chronic conditions.

Rationale for Proposal

- Persons with mental illness often have difficulty accessing services and/or receiving comprehensive services under the current mental health system.
- When fully implemented, the Redesign project will offer clients a "single point of entry" to assess their needs and apply for services, a broader range of flexible services targeted to meet individual needs, improved case management to better coordinate services, and a service delivery system focused on client outcomes.

- This proposal continues the momentum for redesign of the mental health system by constructing single points of entry through functional eligibility screening in the pilot sites.
- The proposal does not require any new GPR funding. In recognition of the tight constraint on state funding, the Department identified an appropriate non-GPR source of funding for this proposal.